

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mm</i>		10/5/99
O.I.P.E. CLASSIFIER		12	10/18/99
FORMALITY REVIEW	CM	71632	

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	4/17/03
2	9/25/03
3	5/26/04
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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Best Available Copy